

LARL 16324-2 (NASA Case No.)

## Declaration, Power of Attorney and Petition - Original Application

As a below named inventor, I hereby declare that: My residence, mailing address and citizenship, are stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

Self Activating System And Method For Alerting When An Object Or A Person Is Left Unettended

Sen-Activating System And Method For A	Alerung when A	An Object Of A Person Is Left Unatten	ded
the specification of which is attached he	reto, was fi	iled on (Date)	
as Application Serial No.	and was ar	nended (Date)	<u> </u>
I have reviewed and understand the contents of amendment referred to above.	the above identifi	ied specification, including the claims, as an	nended by any
I acknowledge the duty to disclose to the Patent patentability as defined in 37 CFR §1.56.	t and Trademark (	Office all information which is known to me t	to be material to
I hereby claim the benefit under 35 U.S.C. §120 each of the claims of this application is not disciparagraph of 35 U.S.C. §112, I acknowledge the material to patentability as defined in 37 CFR §1 national or PCT international filing date of this a	osed in the prior ledge of the design of the	Jnited States application in the manner prov to the Patent and Trademark Office all infor	rided by the first
10/011,229 , 11/27/2001 , the (Serial No.) (Filing Date)	e status of which is	s patented, pending,	abandoned.
I hereby claim priority benefits under Title 35, Un $\frac{60/329,692}{\textit{(Provisional Serial No.)}}, \frac{10/11/2001}{\textit{(Filing Date)}}, the provision of the priority benefits under Title 35, University of the priority of$			plications listed below
POWER OF ATTORNEY: I hereby appoint the for Patent and Trademark Office connected therewith Registered practitioner(s) at Customer	th:		act all business in the
Registered practitioner(s) listed below			
(Name)	(Reg. No.)	(Name)	(Reg. No.)
(Name)	(Reg. No.)	(Name)	(Reg. No.)
(Name)	(Reg. No.)	(Name)	(Reg. No.)
ADDRESS ALL CORRESPONDENCE TO:		DIRECT TELEPHONE CALLS TO:	
Customer Number	, OR	Telephone (Complete number to be dialed from USPTO):	
Correspondence Address listed below		757-864-2470 (voice)	
Name: Kurt G. Hammerle		757-864-9190 (facsimile)	
Address: NASA Langley Research Center			
Mail Stop 212			
Hampton, VA 23681-2199			

Further, as a name	ed inventor, I certify that the Governmen	nt of the United States of America, as rep	resented by the Administrator of the
National Aeronauti	ics and Space Administration has	an assignment in, or license to	the invention set forth
in this application a	and has the irrevocable right to prosecut	te this application and to receive the pate	ent.
		this invention or discovery described and	-
specification and c	laims, and I hereby subscribe my name	to the foregoing specification, claims, po	wer of attorney and this petition.
I hereby declare th	est all statements made herein of my ow	n knowledge are true and that all stateme	
		were made with the knowledge that willful	
		ler 18 U.S.C. §1001; and that such willful	
	application or any patent issuing thereon.		
TITL NAME	LAST	FIRST	MIDDLE OR INITIAL
FULL NAME OF INVENTOR	EDWARDS		
	CITY	William STATE OR FOREIGN COUNTRY	Christopher COUNTRY OF CITIZENSHIP
RESIDENCE AND	' <u> </u> -		
CITIZENSHIP	Poquoson STREET NO. AND NAME	Virginia CITY AND STATE (OR COUNTRY)	USA
MAILING		·	ZIP CODE
ADDRESS	112 White House Drive	Poquoson, VA	23662
SIGNATURE	PD 11 51 1		DATE
Wille	Chings Court		2-20-04
FULL NAME	LAST	FIRST	MIDDLE OR INITIAL
OF INVENTOR	MACK	Тетту	L.
	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
RESIDENCE AND CITIZENSHIP	Hampton	Virginia	USA
	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
MAILING ADDRESS	40 Peterborough Drive	Hampton, VA	23666
SIGNATURE			DATE
1,	Les Mach		2-20-64
arry		<u> </u>	
FULL NAME	LAST	FIRST	MIDDLE OR INITIAL
OF INVENTOR	MODLIN	Edward	Α.
RESIDENCE AND	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
CITIZENSHIP	Yorktown	Virginia	· USA
MAILING	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
ADDRESS	305 Treis Trace	Yorktown, VA	23693
GIGNATURE	4 -		DATE / /
Tolw	and a Moclai		2/20/04
		T	
FULL NAME	LAST	FIRST	MIDDLE OR INITIAL
	(intentionally left blank)		
KESIDENCE AND	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
CITIZENSHIP			USA
MAILING ADDRESS	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
IGNATURE			DATE
MINIONE		İ	DATE
			1